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FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Issuance of Series B-l Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Autotask Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
96 Thompson Hill Road, Rensselaer, NY 12144	<u>(518) 720-35</u> 00
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Software development specializing	in the automation and
management of business processes for project-driv organizations.	
Type of Business Organization	
business trust limited partnership, already formed other (ple	ease specify): PROCESSED
Month Year	JUN 2 4 2005
Actual or Estimated Date of Incorporation or Organization:	
CN for Canada; FN for other foreign jurisdiction)	DE THOMSON
GENERAL INSTRUCTIONS	MANGIAL
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied to be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Scare to be not have been made. If a state requires the payment of a fee as a precondition to the claim for	ecurities Administrator in each state where sales

- ATTENTION -

accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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this notice and must be completed.

A. DASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the	issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
• Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer X Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Godgart, Robert	
Business or Residence Address (Number and Street, City, State, Zip Code)	
96 Thompson Hill Drive, Rensselaer, NY 12144	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Frederick, Richard	
Business or Residence Address (Number and Street, City, State, Zip Code)	
96 Thompson Hill Drive, Rensselaer, NY 12144	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Sekhar, Giri	
Business or Residence Address (Number and Street, City, State, Zip Code)	
96 Thompson Hill Drive, Rensselaer, NY 12144	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Managing Partner	
Full Name (Last name first, if individual)	
McNamee, George	
Business or Residence Address (Number and Street, City, State, Zip Code)	
96 Thompson Hill Drive, Rensselaer, NY 12144	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
FA Technology Ventures, L.P.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
100 Federal Street, 33rd Floor, Boston, MA 02110	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

	B. INFORMATION ABOUT OFFERING	<u> </u>	
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No
1.	Answer also in Appendix, Column 2, if filing under ULOE.	<u> </u>	
2.	What is the minimum investment that will be accepted from any individual?	\$ <u>60,</u>	170.38
_		Yes	No
3.	Does the offering permit joint ownership of a single unit?		K
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Fu	l Name (Last name first, if individual)		
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)		
	me of Associated Broker or Dealer		
Na	me of Associated Broker of Dealer		
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers	-	
	(Check "All States" or check individual States)	☐ A	ll States
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	MO PA PR
Fu	Il Name (Last name first, if individual)		
Bı	siness or Residence Address (Number and Street, City, State, Zip Code)		
Na	me of Associated Broker or Dealer		
St	ntes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		-
	(Check "All States" or check individual States)	A	ll States
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	MO PA PR
Fι	Il Name (Last name first, if individual)		
— Bı	siness or Residence Address (Number and Street, City, State, Zip Code)		
N	ime of Associated Broker or Dealer		
St	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	(Check "All States" or check individual States)	A	II States
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and					
	already exchanged.	Α	ggregate		Am	ount Already
	Type of Security		ering Price		1 7711	Sold
	Debt	5	0		\$	0
	Equity					
	· Common Preferred			_		
	Convertible Securities (including warrants)	t	Ο		\$	0
	Partnership Interests				Ψ—–	0
	Other (Specify)				ু— ১	0
	Total					
	Answer also in Appendix, Column 3, if filing under ULOE.	₽ <u>∠</u>	,000,0	<u> </u>	ა_±	,730,000
2.						
			Number Investors			Aggregate ollar Amount of Purchases
	Accredited Investors		3		\$ <u>l</u>	,750,000
	Non-accredited Investors		0	_	\$_	0
	Total (for filings under Rule 504 only)				\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.					
			Type of		D	Oollar Amount
	Type of Offering		Security			Sold
	Rule 505			_		
	Regulation A				\$_	
	Rule 504				\$_	
	Total	_		— .	\$_	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs				\$	00
	Legal Fees			X	\$_	22,650
	Accounting Fees			X	\$	5,000
	Engineering Fees				\$_	0
	Sales Commissions (specify finders' fees separately)				\$_	0
	Other Expenses (identify)			X	\$_	1,500
	Total			\overline{X}	\$	29,150

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price and total expenses furnished in response to Part C — Question proceeds to the issuer."	4.a. This difference is the "adjusted gross			\$ <u>1,9</u>	70,850
5.	Indicate below the amount of the adjusted gross proceed to the each of the purposes shown. If the amount for any purpose check the box to the left of the estimate. The total of the pay proceeds to the issuer set forth in response to Part C — Qu	e is not known, furnish an estimate and nents listed must equal the adjusted gross				
	·		-	ments to		
			A	ectors, & Tiliates	Ő	ments to thers
	Salaries and fees		K] \$2.	50,000	X \$1	000,000
	Purchase of real estate		<u> </u>	0	□\$	0
	Purchase, rental or leasing and installation of machinery and equipment			0		20.000
						000,000
	Construction or leasing of plant buildings and facilities		∐ ₃		□ ₽	
	Acquisition of other businesses (including the value of sec offering that may be used in exchange for the assets or sec	curities involved in this curities of another				
	issuer pursuant to a merger)		□\$_	0	S_	0
	Repayment of indebtedness		□\$_	0	<u></u> \$_	0
	Working capital		□ \$_	0	X \$_6	520,850
	Other (specify):		S _	0	_\$_	0
			□\$_	0	. 🗆 🖫	0
	Column Totals		£]\$_	250,00	OX \$_	1 <u>,720,</u> 850
	Total Payments Listed (column totals added)			<u>x1</u>	,970	<u>,</u> 850
	D.	EDERAL SIGNATURE	(1/4 N/2)			
Si	ne issuer has duly caused this notice to be signed by the undersignature constitutes an undertaking by the issuer to furnish to e information furnished by the issuer to any non-accredited	the U.S. Securities and Exchange Comminuestor pursuant to paragraph (b)(2) of	ission,	upon writte	ile 505, ti en reques	ne following t of its slaff,
19	suer (Print or Type) Signat	# / / /	Date	1111		
Δ	utotask Corporation	Mall I		6/18	0	<u> </u>
N	ame of Signer (Print or Type)	of Signer (Print or Type)		J		
R	ichard Frederick Pre	sident and Chief Ope	rat	ina Of	fice	1

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	· · ·								
	1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ☑							
		See Appendix, Column 5, for state response.									
	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on form D (17 CFR 239.500) at such times as required by state law.										
	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by issuer to offerees.										
	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.										
		per has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behal thorized person.	f by the	undersigned							
lssı	ier (Print or Type) Date Date	1.0								
A	ut	otask Corporation	20								

President and Chief Operating Officer

Instruction.

Name (Print or Type)

Richard Frederick

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX					
1	Intend to non-a investor	to sell ccredited s in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		X								
AK		X								
AZ		X								
AR		X								
CA		X							, ,	
СО		X								
СТ		X								
DE		X								
DC		X								
FL		X								
GA		X								
HI		X								
lD		X								
IL		Х								
IN		X								
IA		X								
KS		X								
KY		X								
LA		X								
ME		X								
MD		X								
MA		X	\$1,690,803.20	2	\$1,479,453	.60 0	0		X	
Ml		X								
MN		X								
MS		Х								

APPENDIX

1	. 2		3			4		5 Disqual	
	Intend to non-ac investors (Part B	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		X							
MT		X							
NE		X							
NV		X							
NH		X						1 11 11 11 11	
NJ		X							
NM		X						Γ	Γ
NY		X	\$309,196.83	1	\$270,547.3	6 0	0		X
NC		X						,	
ND		X				· ·			
ОН		X							
ОК		Х							
OR	:	X.							<u> </u>
PA		X						, ,,,	
RI		X							
SC		X						<u> </u>	
SD	,	X							
TN		X	:						
TX		Х							
UT		X							
VT		X							Para 2000 100 100 100 100 100 100 100 100 10
VA		X	1						
WA		X							
WV		X						processor annual contract	
WI		X							

APPE		

1		2	3	4			5				
			Turn of accounity					Disqualification under State ULOE			
	Intend	to sell	Type of security and aggregate					(if yes, atta			
		ccredited	offering price		Type of investor and			explanation of			
		s in State	offered in state		amount purchased in State			waiver granted)			
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)			
				Number of Accredited		Number of Non-Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
WY		Х									
PR		X									